## UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF MICHIGAN

## **COVER SHEET FOR AMENDMENTS**

Case	Name:	Betty Jean Bad	dalamenti			Case No.:	18-56638		
DESC	RIBE INFO	ORMATION BE	ING AMENDED	BY CHECKING	G APPLICABLE	BOX(ES) BI	ELOW:		
☐ An	nendmen  Name Signa mmary of atement of hedules a Schedule Schedule List of C  Add debt - \$3	t to Petition: Debtor(s) Mature Debtor(s) Mature Comply f Your Assets and Financial Afford List of Cree A/B Complete C Debtoreditors School Complete School Co	lailing Address [ ing with Order D and Liabilities a airs ditors: or 2 Schedule C edule D  Sche vide address of a	☐ Alias Directing the Filir and Certain Sta	ng of Official Fo atistical Inform on the List of C	rm(s) ation	ge amount or cla	assification of	
NC	NOTE: Use Page 2 for any corrections or additions to the List of Creditors.								
Additi	DECLA be relie	d upon by the	TORNEY: I dec	ourt as a compl			on this cover s		
Date	2010		Signature /s/ Daniela Dim	- Lineur	1				
April 8	AFFIRM the atta		BTOR(S): I dec es, lists, statem	lare under pen			ead this cover s		
Date April 8	3 2019		Signature /s/ Betty Jean B	Radalamenti X	Bette	Bad	hollomo.	u 1	
PAPITI C	., 2010		, or botty boarr t	Judanument /	C	e ve	ap corre		

## CORRECTIONS TO THE LIST OF CREDITORS

Use this section to make corrections to the name(s) and address(es) of any creditor(s) listed on the current schedules and List of Creditors.

PREVIOUS NAME/ADDRESS OF CREDITOR:	PLEASE CHANGE TO: -NONE-	56
ADDITIONS T	O THE LIST OF CREDITORS	
Use this section to identify creditors added to the NAME OF CREDITOR:	schedules and List of Creditors.	N .
ADDRESS:		
NAME OF CREDITOR:		
ADDRESS:		
NAME OF CREDITOR:		
ADDRESS:		
FOR ADDITIONAL CORRECTIONS	ADDITIONS, COPY THIS SHEET AND CONTINUE	

	in this information to identify your c	ase:							
De	otor 1 Betty Jean B	Badalamenti							
	otor 2						8		
Un	ted States Bankruptcy Court for the	EASTERN DISTRICT	OF MICHIGAN						
	se number 18-56638					Check if this is:			
(If K	nown)					An amende	N 100-50 0		
								ng postpetition chapte following date:	
0	fficial Form 106I					MM / DD/ Y	YYYY		
S	chedule I: Your Inc	ome						12	
11.000	the Describe Employment Fill in your employment	On the top of any additi	onal pages, write y	our nam	e and	l case number (if	known). A	Answer every questi	
100	information.		Debtor 1			Debtor 2	Debtor 2 or non-filing spouse		
	If you have more than one job, attach a separate page with	Employment status	Employed			in the second se	☐ Employed		
	information about additional employers.	9 5	☐ Not employed			∐ Not e	☐ Not employed		
	Include part-time, seasonal, or	Occupation	security						
	self-employed work.	Employer's name	Great Lakes Se	curity					
	Occupation may include student or homemaker, if it applies.	Employer's address	2002 Hogback Ann Arbor, MI		105				
		How long employed t	here? 2 mont	hs					
Par	t 2: Give Details About Mor	thly Income							
spoi	mate monthly income as of the da use unless you are separated. u or your non-filing spouse have mo								
mor	e space, attach a separate sheet to	this form.	monito trio imprimate	ii ioi aii i	ompic	yers for that perso	ii on the ii	nies below. II you nee	
	8					For Debtor 1		btor 2 or ing spouse	
			efore all payroll			4 000 40		<b>N//</b>	
2.	List monthly gross wages, salar deductions). If not paid monthly, or	y, and commissions (be alculate what the monthl	y wage would be.	2.	\$	1,035.10	\$	N/A	
2. 3.	List monthly gross wages, salar deductions). If not paid monthly, of Estimate and list monthly overti	alculate what the monthl	y wage would be.	3.	+\$	0.00	+\$	N/A	

Debto	rđ,	Betty Jean Badalamenti		Case	number (if known)	18-56	638
				For	Debtor 1		ebtor 2 or illing spouse
1	Cop	y line 4 here	4.	\$	1,035.10	\$	N/A
5. 1	ist	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	405.00	S	NIZA
	5b.	Mandatory contributions for retirement plans	5b.	s —	195.89	\$	N/A N/A
	5c.	Voluntary contributions for retirement plans	5c.	s —	0.00	š —	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$-	0.00	s —	N/A
	5e.	Insurance	5e.	\$	0.00	\$	N/A
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A
	5g.	Union dues	5g.	\$	0.00	\$	N/A
	5h.	Other deductions. Specify:	5h	- \$	0.00	+ \$	N/A
6. /	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	195.89	\$	N/A
7. (	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	839.21	\$	N/A
	List Ba.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total					
		monthly net income.	8a.	\$	0.00	\$	N/A
8	Вb.	Interest and dividends	8b.	\$	0.00	\$	N/A
ŧ	Bc.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		-		<u> </u>	501920
02		settlement, and property settlement.	8c.	\$	0.00	\$	N/A
	Bd. Be.	Unemployment compensation Social Security	8d. 8e.	<u>\$</u> _	0.00	\$ 	N/A
	Bf.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	7/86	s	1,824.00	s —	N/A
	Bg.	Pension or retirement income	- 8g.	\$	97.61	\$	N/A
ŧ	Bh.	Other monthly income. Specify: help from family	8h.+	- \$_	UNDERSONAL A	+ \$	N/A
Э. ,	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,671.61	\$	N/A
		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	;	3,510.82 + \$		N/A = \$ 3,510.82
1	inclu othe	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your refriends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a cify;	depen		24. 3		hedule J. 11. +\$ 0.00
1	Add Write appli	the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines	ult is ti <i>n Liab</i> i	ne com ilities a	bined monthly in nd Related <i>Dat</i> a	ncome. , if it	12. \$3,510.82
13.	Do у	ou expect an increase or decrease within the year after you file this form' No.	?				Combined monthly income
		Yes. Explain:					

(30)	in this information to identify your case:				
Deb	Betty Jean Badalamenti		Che	eck if this is:	
Deb	otor 2	,		An amended filing	ving postpetition chapter
100	ouse, if filing)			13 expenses as of	
Unit	ted States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIG	AN		MM / DD / YYYY	-
13350	nown) 18-56638				
0	fficial Form 106J				
	chedule J: Your Expenses				12/15
Be	as complete and accurate as possible. If two married people and ormation. If more space is needed, attach another sheet to this to mber (if known). Answer every question.	e filing together, both a form. On the top of any	are eq addit	ually responsible fo ional pages, write y	or supplying correct
1.	Is this a joint case?				
	No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses	for Separate Household	of De	btor 2.	
2.	Do you have dependents? No				
-	Section Communication and Articles and Communication and Communication (Communication)		120 6/10/10/1		
	Do not list Debtor 1 and Yes. Fill out this information for each dependent	Dependent's relationsh Debtor 1 or Debtor 2	ip to	Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				Yes
					□ No
					☐ Yes
					□ No
					☐ Yes
					□ No
3.	Do your sympasses lastings				☐ Yes
٥,	Do your expenses include expenses of people other than				
	yourself and your dependents?				
Par	2: Estimate Your Ongoing Monthly Expenses				
Est	imate your expenses as of your bankruptcy filing date unless your bankruptcy filing date unless your bankruptcy is filed. If this is a supplicable date.	ou are using this form lemental <i>Schedule J</i> , c	as a s heck t	upplement in a Cha he box at the top o	pter 13 case to report f the form and fill in the
app	nicable date.				
Incl	ude expenses paid for with non-cash government assistance if	you know			
	value of such assistance and have included it on Schedule I: Yo ficial Form 106I.)	our Income		Your expe	enses
<b>■</b> 1075/868	क्रिकेट विकास के क्षेत्र के क्ष		101100		0.000
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	clude first mortgage	4.	\$	291.00
	If not included in line 4:				
	4a. Real estate taxes		4a.	\$	0.00
	4b. Property, homeowner's, or renter's insurance			\$	0.00
	4c. Home maintenance, repair, and upkeep expenses			\$	0.00
_	4d. Homeowner's association or condominium dues		4d.	\$	0.00
5.	Additional mortgage payments for your residence, such as hon	ne equity loans	5	\$	4E9 00

Official Form 106J

Schedule J: Your Expenses

Deb	tor 1 Betty Jean Badalamenti	Case number (if known)	18-56638
6.	Utilities:		
55	6a. Electricity, heat, natural gas	6a. \$	317.61
	6b. Water, sewer, garbage collection	6b. \$	70.00
0	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	109.00
	6d. Other. Specify:	6d. \$	0.00
7.	Food and housekeeping supplies		530.00
8.	Childcare and children's education costs	8. \$	0.00
9.	Clothing, laundry, and dry cleaning	9. \$	100.00
10.	- 1일 경기업 가게 하면 하면 경기 기업 가게 되었다면 하면 보고 있다면 기업 가게 되었다면 하면 보다.	10. \$	125.00
11.	Medical and dental expenses	11. S	200.00
12.	- B. (2014) [40] [40] [40] [40] [40] [40] [40] [40]	11. 4	200.00
12.	Do not include car payments.	12. \$	100.00
13.	- 25 마루 바로 1 40 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	13. \$	100.00
14.		14. S	0.00
15.			0.00
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a. \$	43.00
	15b. Health insurance	15b. \$	0.00
	15c. Vehicle insurance	15c. \$	206.00
	15d. Other insurance, Specify:	15d. \$	0.00
16	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	100. 0	0.00
10.	Specify:	16. S	0.00
17	Installment or lease payments:		0.00
6000	17a. Car payments for Vehicle 1	17a. \$	458.55
	17b. Car payments for Vehicle 2	17b. \$	0.00
	17c. Other. Specify: extra credit union	17c. \$	1000000000
	17d. Other. Specify:	17d. \$	175.00
10	Your payments of alimony, maintenance, and support that you did not report as	170. \$	0.00
10.	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. S	0.00
19	Other payments you make to support others who do not live with you.	\$	0.00
	Specify:	19.	0.00
20.			
	20a. Mortgages on other property	20a. \$	0.00
	20b. Real estate taxes	20b. \$	0.00
	20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
	20e. Homeowner's association or condominium dues	20e. \$	
24			0.00
21.	Other: Specify: pet	21. +\$	100.00
	cigarettes		50.00
	christmas birthdays etc	+\$	75.00
22.	Calculate your monthly expenses		
	22a. Add lines 4 through 21.	\$	3,508.16
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	s	0,000.10
		· ·	2 500 10
	22c. Add line 22a and 22b. The result is your monthly expenses.	\$	3,508.16
23.	Calculate your monthly net income.	<del></del>	
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,510.82
	23b. Copy your monthly expenses from line 22c above.	23b\$	3,508.16
	and the second s		5,555.15
	23c. Subtract your monthly expenses from your monthly income.	1000	140 140
	The result is your monthly net income.	23c. \$	2.66
	7A 9A 19 0 0 04.5 X 90	1000 302 ° 2 = =	
24.			1975-1976 (1975-1984-1985-1986) (1975-1984-1986) (1975-1984-1986) (1975-1984-1986)
	For example, do you expect to finish paying for your car loan within the year or do you expect your	mortgage payment to incre	ease or decrease because of a
	modification to the terms of your mortgage?		
	No.		
	Yes. Explain here:		